

23026 U.S. PTO  
020504

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Box Patent Application  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

15535 U.S. PTO  
10/772848  
020504

NEW APPLICATION TRANSMITTAL

Transmitted herewith for filing is the patent application of John M. Barrie, Colin Sherman and Michael Kang for Systems And Methods For Contextual Mark-Up Of Formatted Documents.

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this New Application Transmittal and the documents referred to as enclosed therein are being deposited with the U.S. Postal Service on this date **February 5, 2004** in an envelope as "Express Mail Post Office to Addressee" Mailing Label Number **EL 992 783 990 US** addressed to: **Box Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

  
Jennifer B. Xistris

1. **Type Of Application**  
This new application is for a(n)  
☒ Original (nonprovisional)
2. **Papers Enclosed That Are Required For Filing Date Under 37 C.F.R. § 1.53(b) (Regular) or 37 C.F.R. § 1.153 (Design) Application**  
12 Pages of Specification  
2 Pages of Claims  
1 Page of Abstract  
16 Sheets of Formal Drawings
3. **Declaration**  
☒ Enclosed  
☒ Unexecuted.
4. **Inventorship Statement**  
The inventorship for all the claims in this application is:  
☒ the same
5. **Language**  
☒ English
6. **Fee Calculation (37 C.F.R. § 1.16)**  
☒ Regular application

CLAIMS AS FILED

Number Filed	Number Extra	Rate	Basic Fee - \$770.00 (37 C.F.R. § 1.16(a))
Total Claims (37 C.F.R. § 1.16(c))	13 - 20 =	0 × \$18.00 =	\$0.00
Independent Claims (37 C.F.R. § 1.16(b))	2 - 3 =	0 × \$86.00 =	\$0.00
Multiple Dependent Claim(s), if any (37 C.F.R. § 1.16(d))	+ \$290.00 =		\$0.00
Filing Fee Calculation			\$770.00
7. <b>Small Entity Statement(s)</b> <input checked="" type="checkbox"/> Verified Statement(s) that this is a filing by a small entity under 37 C.F.R. §§ 1.9 and 1.27.	Filing Fee Calculation (50% of above)		\$385.00
8. <b>Fee Payment Being Made At This Time</b> <input checked="" type="checkbox"/> Enclosed <input checked="" type="checkbox"/> basic filing fee	Total Fees Enclosed		\$385.00

9. **Method of Payment of Fees**

☒ Check in the amount of \$385.00

10. **Authorization To Charge Additional Fees and Credit Overpayment**

☒ The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No.: **08-1290**. An originally executed duplicate of this transmittal is enclosed for this purpose.


11. **Power of Attorney by Assignee**

☒ Enclosed

12. **Return Receipt Postcard**

☒ Enclosed

Dated: February 5, 2004

  
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☒ **Statement Where No Further Pages Added**

☒ This transmittal ends with this page.